Child Spine 1x1

Siemens go.All

Application Examples: c-spine fracture

Oral Contrast	No
IV Contrast / Volume	No

Technical Factors

Detector Collimator	Acq 32 x 0.7mm
Care kV	On / 110 kV
Care Dose 4D	On /160 mAs
Rotation Time	0.5
Pitch	0.8
Typical CTDIvol	

Topogram: AP, Lateral, 256 mm

Spine 1x1	Recon Type	Width / Inc	Algorithm	Safire	Window	FOV	Series Description	Networking	Post Processing
Recon 1	Axial	1 x 1	Br56	2	Baby Spine	120	AXIAL BONE	PACS	-
Recon 2	Axial	1 x 1	Br40	2	Baby Abdomen	120	AXIAL STND	PACS	-
Recon 3	3D:Axial	1 x 1	Br56	2	Baby Spine	-	AXIAL MPR	PACS	AXIAL MPR
Recon 4	3D: COR	1 x 1	Br56	2	Baby Spine		COR	PACS	COR MPR
Recon 5	3D:SAG	1 x 1	Br56	2	Baby Spine	-	SAG	PACS	SAG MPR
Recon 6	Axial	0.6 x 0.6	Br36	2	Baby Spine	-	AXIAL 0.6 STND	TeraRecon	-

This protocol is used for cervical spines studies.

Patient Position: Patient lying in supine position, hyperextend neck slightly so that the IOML is perpendicular to table, secure head well.

Patient Instructions: Use immobilization devices to assure there will be no motion during the scan.

Take AP and Lateral topograms to include enough vertebral bodies for counting levels. Scan area of interest. Coronal and Sagittal MPRs using raw data in 4D workplace. Make sure proper images are sent to PACS.